

Retailers E85 Quarterly Report

		Quarter Ending: Due Date:			
Mailing Addre	ess	Location	Location Address		
Name:		Name:	Name:		
			s 1:		
			s 2:		
State:	Zip Code: State:		Zip Code:		
		County	Name:		
		SSN: _			
		Iowa S	ales Tax Permit No.:		
		Iowa W	eights & Measures No.:		
	Quarterly Report				
	4. Batall Tatal Organ Callaga	-4 505			
	Retail Total Gross Gallons of E85 sold for the quarter:11.				
	Report E70 and E85 as E85.				
	2. Total Gross Gallons Purchased				
	for the quarter:22.				
	Complete schedule 86-003.				
	If first time filing, start date for selling E85:				
	Please check which of the following apply to your E85 Total:				
	☐ Non Blender, E85 purchased as a blended product				
	☐ E85 product Blender of E85 at this retail location				
	Other, please explain:				
	Mail To:	Q	uestions?		
	Iowa Department of Revenue	Ca	all: 515-281-3729		
	Attn: Fuel Tax	1 4%: 01		15-281-3756	
	PO Box 10465 E-mail: idrn Des Moines, IA 50306-0465		mail: idrmotorfuel@iowa.gov	′	
	DC3 MOINCS, 174 30000 0400				
	gned, declare under penalty of perjug documentation, and to the best of				
Signature:	Ε)ate:	Phone Number:		
Print Name: _	Т	itle:	E-mail Address:		

Instructions for Retailers E85 Quarterly Report

Retailers of E85 gasoline must file a report with the Department. Reports are filed on a quarterly basis. The report is due on or before the last day of the month following the calendar quarter covered by the report. A report must be filed even if there is no E85 activity in Iowa during the quarter. A separate report is required for each location that sells E85.

The report must also include a listing of the vendors providing E85 gasoline to the retailer and the number of gallons received from each vendor. If the retailer blends E85 gasoline, the retailer must show the number of gallons of motor fuel (including both gasoline and alcohol) purchased and blended.

This report is in addition to the yearly report called Retailers Fuel Gallons Annual Report, due end of January each year.

Quarter Ending and Due Date:

- January 1 to March 31: due April 30
- April 1 to June 30: due July 31
- July 1 to September 30: due October 31
- October 1 to December 31: due January 31

Mailing Address:

Enter the mailing address.

Location Address

Enter the location address.

County Name:

Enter name of county in Iowa where the fuel is sold.

SSN:

If the business is a sole proprietorship, enter the Social Security Number of the owner.

FEIN:

If the business is a partnership, corporation, or limited liability company, enter the FEIN.

Iowa Sales Tax Permit No.:

Enter the Iowa retail sales tax permit number for this location. If the permit is part of a consolidated sales tax permit, also provide the consolidated sales tax permit number. If this location does not have a sales tax permit number, please explain.

lowa Weights and Measures No.:

Enter the Iowa license number issued by the Weights and Measures Division of the Iowa Department of Agriculture for the pump(s) you have at this location

Quarterly Report

Line 1:

Enter gross gallons of all ethanol blended gasoline sold as E85. This includes gasoline blended with ethanol with a blend content of 70% - 85% ethanol.

Line 2:

Enter the total of gross gallons purchased from schedule 86-003.

First Time Filer Start Date:

If this is the first filing, enter your start date of selling E85 at retail.

Type of File:

Check which one of the following applies:

Non Blender – No blending at retail location. E85 purchased as a blended product. E85 Product blender - Retail location took two products and created a blended product E85. Other - please explain.

E-mail Address:

Write your e-mail address clearly. An e-mail will be sent each quarter as a reminder to complete this form.